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FORM PTO-875 (Rev. 8/01)

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

33- 42 6082

		CLAIMS AS	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20		۰			RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
ТО	TAL CHARGEA	BLE CLAIMS	20 min	us 20=	*			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	3 mi	nus 3 =	*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	column 2		TOTAL		OR	TOTAL	760
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column								SMALL	FNTITY	OR	OTHER SMALL I	
_		(Column 1)				(Column 3)		OWALL		-		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		PAID	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	* 22	Minus	**2	0	= 2		X\$ 9=		OR	X\$18=	36
AME	Independent	* 3 NTATION OF MI	Minus	***3	T CL AIN	=		X42=		OR	X84=	
<u> </u> -	FIRST PRESE	NIATION OF MI	ULTIPLE DEI	PENDEN	I CLAIM		J	+140=		OR	+280=	
<u> </u>								TOTAL			TOTAL	
ADDIT. F										OR	ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	_					
ENT B	0	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*20	Minus	** 0	2	=		X\$ 9=		OR	X\$18=	
4ME!	Independent	* 3	Minus	***	5			X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	+140=		OR	+280=	
TOTAL										OR	TOTAL ADDIT. FEE	
		(Column 1)	T		HEST	T	٦.			•		
AMENDMENT C		REMAINING AFTER AMENDMENT	9	NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***		=		X42=		OR	X84=	
IĽ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM							
	If the enter in a live	mn 1 in less than t	he entry in cal-	ıma 2 urit	o "O" in co	aluma 3		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
l	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	dent) is the	e highest numb	er fou	und in the ap	propriate bo	x in co	lumn 1.	